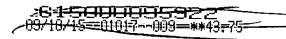
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SEP 2 3 2015

C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	Victory Kingdom W	orship Center			
	N10000001345				
DOCUMENT NUMBER:					
The enclosed Articles of Am	nendment and fee are subn	nitted for filing.			
Please return all corresponde	ence concerning this matte	r to the following:			
Cylinthia Northern					
 		(Name of Contact Pe	rson)		·
Victory Kingdom Worship	Center				
- , , , , , , , , , , , , , , , , , , ,		(Firm/ Company)		
1224 11th ave south					
		(Address)			
St Petersburg Florida 337	705				
		(City/ State and Zip (Code)		
ourjania@yahoo.com					
E	-mail address: (to be used	for future annual rep	ort notificatio	n)	
For further information conc	erning this matter, please	call:			
Cylinthia Northern		at	727	329-9932	
	(Name of Contact Person)		(Area Code)	(Daytime Telephone	: Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida D	epartment of	State:	
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certii Certii (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)	
Mailing A	ddress	Str	eet Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Victory Kingdom Worship Center		
(Name of Corporation as curr	ently filed with the F	lorida Dept. of State)
N10000001345		
(Document Nu	mber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ation:	
N/A		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorpora	
	N/A	7 - K. J.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u></u>	71 (D2)
<u> </u>	<i></i>	S. C.
		ر به المهن ت هي
		0.—
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	RIO
D. If amending the registered agent and/or registered o	ffice address in Flori	da, enter the name of the
new registered agent and/or the new registered office		
Name of New Registered Agent: Cylinth	ia Northern	
1224 1	1th ave south	
New Registered Office Address:		(Florida street address)
	ersburg	33705 , Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	ed Agent:	
I hereby accept the appointment as registered agent. I am		ept the obligations of the position.
	Signature of New Re	gistered Agent, if changing

(remove) President- Alex Thomas Jr. 11601 4th street north/ St Petersburg FL 33716			
Artical 2: principal place of business address 1000 55th Street South Gulfport FL 33707			
	The mailing Address of Corporation is: 1000 55th Street South Gulfport FL 33707		
Artical 5:	Cylinthia Northern 1224 11th ave south St Petersburg FL 33705		
			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change X Remove X Add	<u>V</u> <u>M</u> i	nn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	FS	Cylinthia Northern	1224 11th ave south
x Add	***	-	St Petersburg Fl 33705
Remove			
2) Change	Т	Janet Fitzsimmons	2043 28th st north
× Add		·	St Petersburg FL 33712
Remove 3) Change	s	Mary E Thomas	708 19th Street south
× Add			St Petersburg FL 33712
Remove			
4) Change	VP	Rory Nelson T	11601 4th street north
Add			St Petersburg FL 33716
X Remove			
5) Change	<u>C</u>	Dennis Black	312 22nd street north
x Add			St Petersburg FL 33712
Remove			
6) X Change	P	Kimberly Thomas	11601 4th street north
Add			St Petersburg FL 33716
Remove			

09/09/2015	
	, if other than the
ate this document was signed.	
',' NA	
ffective date if applicable:	
(no more than 90 days after amendment file date)	
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be occument's effective date on the Department of State's records.	listed as the
doption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated O9/09/2015 Signature City	
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing) Financial Secretary (Title of person signing)	
(Title of person signing)	